

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			4-15-99
FORMALITY REVIEW	MP RESP	59227	4/23/99

MP RESP

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
1	1/20/01
2	1/20/01
3	1/20/01
4	1/20/01
5	1/20/01
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Claim	Date
51	1/20/01
52	1/20/01
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100	1/20/01

Claim	Date
101	1/20/01
102	1/20/01
103	1/20/01
104	1/20/01
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148	1/20/01
149	1/20/01
150	1/20/01

If more than 150 claims or 10 actions  
 staple additional sheet here

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